Characteristics of the studies reviewed.

| Author, year, | Study design | | Setting; | Sample ^a | | |
|---------------|---------------------|----------------------------------|-----------------|---------------------|---------------------|----------------|
| country | | | recruitment | | | |
| | Study type | Study duration (test- | | n (total, | Age, in | Sex; female, |
| | | retest intervals) | | interventi | years (mean | male (% (n/N)) |
| | | | | on group) | [SD ^b], | |
| | | | | | range) | |
| Ahmedani et | Noncomparative | Pretreatment, | Clinic-based; | 64 | >49 | 67% (45/64), |
| al, 2015, | (pilot | posttreatment, FU ^c 1 | referral by 2 | | n=45 | 33% (19/64) |
| United States | feasibility study) | (after 2 weeks via | physicians | | (70.3%) | |
| [41] | | telephone) | from a spine | | | |
| | Longitudinal | - | clinic | | <50 | _ |
| | | | | | n=19 | _ |
| | | | | | (29.7%) | |
| Berger et al, | RCT ^d | Pretreatment, | Community- | 76 | 38.8 (14.0), | 70% (53/76), |
| 2011, | | posttreatment (after | based; | | 20-78 | 30% (23/76) |
| Switzerland | | 10 weeks), FU1 (at | newspaper | | | |
| [25] | | 6 months) | articles and a | | | |
| | | , | TV interview | | | |
| | | | | (IGe I: | - | |
| | | | | n=25) | | |
| | Longitudinal | - | | (IG II: | _ | |
| | | | | n=25) | | |
| Berman et al, | Noncomparative | BL ^f , midtreatment | Community- | 29 | 53 (12.6) | 79%, 21% |
| 2014, United | (feasibility study) | (after 4 weeks), | based | | | |
| States [31] | | study end point | (university) | | | |
| | | (after 10 weeks) | and outpatient | | | |
| | Longitudinal | | based; referral | | | |
| | | | from the | | | |
| | | | employee | | | |
| | | | assistance | | | |
| | | | program, a | | | |
| | | | health | | | |
| | | | coaching | | | |
| | | | program, | | | |
| | | | posters, and | | | |
| | | | newspaper | | | |
| | | | advertisements | | | |

| Boeschoten et | Noncomparative | BL, postintervention | Clinic- and | 44 | 45 (12) | 77%, 23% |
|----------------|--------------------|-----------------------|--------------------|---------|--------------|----------------|
| al, 2012, The | (pilot study) | | outpatient- | | | |
| Netherlands | | | based; clinical | | | |
| [42] | Longitudinal | - | patient | | | |
| | | | registry, | | | |
| | | | advertisements | | | |
| | | | in MS ^g | | | |
| | | | newsletters, | | | |
| | | | and direct | | | |
| | | | referral by | | | |
| | | | neurologists | | | |
| Burns et al, | Noncomparative | BL, midtreatment | Community- | 8 | 37.4 (12.2), | 88% (7/8), 12% |
| 2011, United | (single-arm field | (at week 4), | based; Web- | | 19-51 | (1/8) |
| States [43] | trial) | posttreatment (at | based | | | |
| | Longitudinal | week 8) | advertising | | | |
| | | | venues | | | |
| Cartreine et | RCT (pilot | BL, posttreatment 1 | Community- | 14 (7) | IG: 48.6 | IG: 71% (5/7), |
| al, 2012, | feasibility study) | week (after the final | based; emailed | | (10.2) | 29% (2/7) |
| United States | Longitudinal | ePST session), FU | information to | | | |
| [32] | Longitudinai | (4 weeks after | persons listed | | | |
| | | completion) | on a registry of | | | |
| | | | those | | | |
| | | | interested in | | | |
| | | | receiving | | | |
| | | | information | | | |
| | | | about clinical | | | |
| | | | trials for | | | |
| | | | depression | | | |
| Choi et al, | RCT | Pretreatment, | Community- | 55 (25) | 39.04 | 80% (44/55), |
| 2012, | Longitudinal | posttreatment, | based; | | (11.68), 21- | 20% (11/55) |
| Australia [44] | | FU (after 3 months) | applicants | | 68 | |
| | | | applied online | | | |
| | | | after reading | | | |
| | | | details about | | | |
| | | | the study and | | | |
| | | | inclusion and | | | |
| | | | exclusion | | | |
| | | | criteria in the | | | |
| | | | mass media | | | |

| Danaher et al, | Noncomparative | Pretest, posttest | Community- | 53 | 31.9 (5.1) | 100% (53/53), |
|-----------------|--------------------|---------------------|-----------------------|------------|-------------------------|---------------|
| 2013, United | (pilot feasibility | (after 3 months), | and clinic- | | | 0% (0/53) |
| States [24] | trial) | FU (after 6 months) | based; birth | | | |
| | | | records, nurse | | | |
| | Longitudinal | | or health | | | |
| | | | professional | | | |
| | | | referrals, Web- | | | |
| | | | based | | | |
| | | | advertisements | | | |
| | | | , and news | | | |
| | | | stories to local | | | |
| | | | university and | | | |
| | | | hospital | | | |
| | | | settings | | | |
| de Graaf et al, | RCT | BL, FU1 (at 3 | Community- | 200 | | |
| 2009, The | Longitudinal | months), FU2 (at 9 | based; | | | |
| Netherlands | Longitudinal | months) | recruitment in | | | |
| [45] | | | the general | (100) | IG: 44.3 | IG: 52%, 48% |
| | | | population by | | (11.8) | |
| | | | means of a | (100) | IG + TAU ⁱ : | IG + TAU: |
| | | | large-scale | | 45.2 (10.9) | 63%, 37% |
| | | | Internet-based | | | |
| | | | screening | | | |
| Dear et al, | Noncomparative | Pretreatment to | Community- | 20 | 63.4 (5.08), | 65% (13/20), |
| 2013, | (single-group | posttreatment, | based; | | 60-80 | 35% (7/20) |
| Australia [30] | open trial) | posttreatment to FU | clinical | | | |
| | Longitudinal | (after 3 months) | research | | | |
| | Longitudinai | | website set up | | | |
| | | | for iCBT ^h | | | |
| | | | trials | | | |
| Dimidjian et | Comparative | BL, posttreatment, | Outpatient- | 200, (100) | IG: 47.40 | IG: 73%, 27% |
| al, 2014, | (open trial) | FU1 (after 2.5 | and clinic- | | (11.43) | |
| United States | | months), | based; self- | | | |
| [51] | Longitudinal | FU2 (after 6 | referral, | | | |
| | | months) | referral by | | | |
| | | | primary care | | | |
| | | | or behavioral | | | |
| | | | health | | | |
| | | | clinicians, | | | |
| | | | identification | | | |
| | | | by electronic | | | |

| | | | medical | | | |
|--|-------------------|----------------------|---------------------------------------|----------|--------------|-----------------|
| | | | records | | | |
| | | | | | | |
| Geraedts et al, | RCT | BL, posttreatment | Community- | 116 | 43 (8.9) | 66.4% (77/116), |
| , and the second se | KCI | | based | 110 | 43 (6.9) | |
| 2015, The | Longitudinal | (after 8 weeks) | | | | 33.6% (39/116) |
| Netherlands | Longitudinai | | (workplace); | | | |
| [46] | | | banners on the | | | |
| | | | company's | | | |
| | | | intranet, | | | |
| | | | pamphlets, and | | | |
| | | | posters | | | |
| Gerhards et | Qualitative | Semistructured | Community- | 18 | 43.6 | 50% (9/18), |
| al, 2011, The | study | interviews | based; | | (14.5) | 50% (9/18) |
| Netherlands | Cross-sectional | - | interview | | | |
| [33] | Cross-sectional | | participants | | | |
| | | | were recruited | | | |
| | | | from the | | | |
| | | | cCBT ^j and | | | |
| | | | cCBT+TAU | | | |
| | | | groups of a | | | |
| | | | previous trial | | | |
| Hind et al, | Qualitative study | Brief written | Community- | 17 | 46, 30-61 | 77% (13/17), |
| | Quantative study | | _ | 17 | 40, 30-01 | 23% (4/17) |
| 2010, United | Cross-sectional | feedback on a | based (1 | (IG I: | | 23% (4/17) |
| Kingdom [28] | Closs-sectional | weekly evaluation | participant | · | | |
| | | sheet, brief | decided to | n=8) | | |
| | | semistructured | undertake | (IG II: | | |
| | | telephone interviews | cCBT in the | n=9) | | |
| | | in the days | clinical | | | |
| | | following the first | research | | | |
| | | session, depth face- | facility, the | | | |
| | | to-face interviews | others worked | | | |
| | | after completion or | on it at home); | | | |
| | | withdrawal | recruitment | | | |
| | | | through letters | | | |
| | | | to former | | | |
| | | | patients of a | | | |
| | | | MS clinic | | | |
| Høifødt et al, | RCT | BL, posttreatment, | Outpatient- | 106 (52) | 36.1 (11.3), | 72.6% (77/106), |
| 2013, Norway | | posttreatment (at 6 | based (primary | (- / | 18-63 | 27.4% (29/106) |
| [12] | | months) | care); | | | (25,100) |
| LJ | | | , , , , , , , , , , , , , , , , , , , | | | |

| | Longitudinal | | recruitment by | | | |
|----------------|-------------------|-------------------------|------------------|---------|-------------|--------------|
| | Longitudinar | | written | | | |
| | | | information | | | |
| | | | provided by | | | |
| | | | | | | |
| | | | general | | | |
| | | | practitioners | | | |
| | | | and primary | | | |
| | | | care nurses | | | |
| Kay-Lambkin | RCT | BL, FU1 (after 3 | Study clinic— | 97 (32) | 35.37 | 54% (52/97), |
| et al, 2011, | | months), FU2 (after | based; | | (10.21) | 46% (45/97) |
| Australia [35] | | 6 months), FU3 | recruitment via | | | |
| | | (after 12 months) | a range of | | | |
| | | | sources, most | | | |
| | Longitudinal | The here reported | commonly via | | | |
| | | results refer to the 3- | self-referral in | | | |
| | | month outcomes | response to TV | | | |
| | | | interviews | | | |
| | | | with the | | | |
| | | | investigators | | | |
| | | | or newspaper | | | |
| | | | articles | | | |
| Knowles et al, | Qualitative Study | Semistructured | Outpatient- | 36 | 51, 26-69 | 72% (26/36), |
| 2015, United | | interviews | based (primary | | | 28% (10/36) |
| Kingdom [29] | | | care); first 80 | | | |
| | Cross-sectional | - | participants to | | | |
| | | | complete their | | | |
| | | | 4-month FU in | | | |
| | | | the main trial | | | |
| | | | were invited | | | |
| | | | by letter to | | | |
| | | | participate | | | |
| Kok et al, | Noncomparative | BL, self-report ques- | Community- | 129 | Assigned | 80% (16/20), |
| 2014, The | (subset of | tionnaires | and outpatient- | | but did not | 20% (4/20) |
| Netherlands | RCT) | | based; | | finish | |
| [47] | Í | | recruitment via | | module 1 | |
| L · J | | | media, general | | (n=20): | |
| | | | practitioners, | | 42.1 (12.1) | |
| | | | practitioners, | | 12.1 (12.1) | |

| | Longitudinal | | and mental | | Finished at | 82% (37/45), |
|-----------------|--------------------|----------------------|-----------------|----------|--------------|----------------|
| | Zongiwaman | | health services | | least one | 18% (8/45) |
| | | | nearth services | | module but | 1070 (0/ 13) |
| | | | | | not all 8 | |
| | | | | | (n=45): | |
| | | | | | 45.4 (10.4) | |
| | | | | | Finished all | 77% (49/64), |
| | | | | | 8 modules | |
| | | | | | | 23% (15/64) |
| | | | | | (n=64): | |
| | | | | | 47.4 (10.7) | |
| Lintvedt et al, | RCT | Preintervention, | Community- | 163 (81) | 28.2 (7.4) | 76.7% |
| 2013, Norway | | postintervention | based | | | (125/163), |
| [48] | Longitudinal | (after 8 weeks) | (university); | | | 23.3% (38/163) |
| | | | emailed | | | |
| | | | screening | | | |
| | | | survey to all | | | |
| | | | registered | | | |
| | | | students at the | | | |
| | | | University and | | | |
| | | | the University | | | |
| | | | College of | | | |
| | | | Tromsø | | | |
| Lucassen et | Noncomparative | BL, | Community- | 21 | 16.5 (1.6), | 48% (10/21), |
| al, 2014, New | (pilot feasibility | postintervention, FU | based (school, | | 13-19 | 52% (11/21) |
| Zealand [36] | trial) | (after 3 months) | organization); | | | 0270 (11721) |
| Zumme [e o] | | (driver & monune) | encouragement | | | |
| | Longitudinal | | through youth- | | | |
| | | | led | | | |
| | | | organization | | | |
| | | | for sexual | | | |
| | | | minority youth | | | |
| | | | and sexual | | | |
| | | | minority | | | |
| | | | media | | | |
| McMurchie et | Comparative | BL, treatment end | Outpatient- | 53 | IG + TAU: | IG + TAU: 76% |
| al, 2013, | Comparative | point (after 2 | based; | (33) | 71.58 (4.43) | (25/33), 24% |
| United | Longitudinal | months), FU (after 3 | recruitment via | (33) | /1.30 (4.43) | |
| | | | | | | (8/33) |
| Kingdom [34] | | months) | older people's | | | |
| | | | community | | | |

| | | | mental health | | | |
|----------------|--------------------------|----------------------|-----------------------|------------|---------------|---------------|
| | | | teams | | | |
| | | | tourns | | | |
| Merry et al, | RCT (randomized | BL, postintervention | Clinic- and | 187 (94) | IG: 15.55 | IG: 63% |
| 2012, New | controlled | (after 2 months), | outpatient- | 107 (54) | (1.54) | (59/94), 37% |
| | | FU (after 5 months) | _ | | (1.54) | (35/94), 37 % |
| Zealand [37] | noninferiority trial) | ro (arter 3 months) | based (primary care), | | | (33/94) |
| _ | | | • | | | |
| | Longitudinal | | community- | | | |
| | | | based (school); | | | |
| | | | referral by | | | |
| | | | clinicians, | | | |
| | | | health care | | | |
| | | | professionals, | | | |
| | | | and school | | | |
| | | | guidance | | | |
| | | | counselors | | | |
| O'Mahen et | RCT | BL, FU1 (after | Community- | 910 (462) | IG + TAU: | IG + TAU: |
| al, 2013, | T | 15 weeks) | based; | | 32.3 (4.7) | 100% |
| United | Longitudinal | | advertisements | | | (462/462), 0% |
| Kingdom [49] | | | on the | | | (0/462) |
| | | | "Netmums | | | |
| | | | parenting | | | |
| | | | website" and | | | |
| | | | the Netmums | | | |
| | | | newsletter | | | |
| | | | | | | |
| Perini et al, | RCT | Pretreatment, | Community- | 45 (29) | 49.29 | 78% (35/45), |
| 2009, | Y '. 1' 1 | midtreatment (after | based; | | (12.06), 19- | 22% (10/45) |
| Australia [38] | Longitudinal | 4 weeks), | recruitment via | | 85 | |
| | | posttreatment (after | the website | | | |
| | | 1 week) | | | | |
| D' 1 1 1 | D.CIII | DI | | 00 | | |
| Richards and | RCT | BL, posttreatment | Community- | 80 | | 777.70 |
| Timulak, | Longitudinal | (after 8 weeks) | based | IG I: n=43 | IG I: 26.53, | IG I: 58% |
| 2013, Ireland | | | (university); | | 20-50 | (25/43), 42% |
| [26] | | | registered | | | (18/43) |
| | | | students at an | IG II: | IG II: 26.65, | IG II: 70% |
| | | | Irish university | n=37 | 19-59 | (26/37), 30% |
| | | | with mild to | | | (11/37) |
| | | | moderate | | | |
| | | | | | | |

| Schneider et al, 2014, United Kingdom [39] | RCT | BL, FU1 (after 6 weeks), FU2 (after 12 weeks) | symptoms as established by the BDI ^k -II Community- based (workplace); 3 large UK employers: 2 private enterprises + | 637 (318) | IG: 42.2 (9.6) | IG: 55.3% (176/318), 42.8% (136/318) (n=6 missing) |
|---|--|---|--|-------------------------------|---|--|
| Sheeber et al, 2012, United States [40] | RCT (pilot trial) Longitudinal | BL, T2 (14 weeks after BL), T3 (12 weeks after T2); (for persons assigned to Mom-Net, the T3 assessment was a FU, for persons | one public sector employer Community-based (Head Start); invitation letters that Head Start staff gave to | 70 (IG I: n=35) (IG II: n=35) | IG I: 31.1 (5.7) IG II: 30.9 (7.0) | 100% (70/70), 0% (0/70) |
| | | initially assigned to delayed intervention or TAU T3 was a postassessment that enabled to examine response to the intervention) | mothers | 24 (15) | | |
| Stasiak et al, 2014, New Zealand [50] | RCT (a pilot double-blind randomized placebo controlled trial) Longitudinal | BL, postintervention, FU1 (after 1 month) | Community- based (school); self-referral to school counselors | 34 (17) | 15.2 (1.5), 13-18 | 41% (14/34), 59% (20/34) |
| Titov et al, 2010, Australia [27] | RCT (randomized controlled noninferiority trial) Longitudinal | BL, posttreatment (after 11 weeks), FU (after 4 months) | Community- based; information on the website | 127 | 43 (12.86), 19-73 | 74% (94/127), 26% (33/127) |

^aAll values are indicated as in studies provided.

^bSD: standard deviation.

^cFU: follow-up.

^dRCT: randomized controlled trial.

^eIG: intervention group.

^fBL: baseline.

gMS: multiple sclerosis.

^hiCBT: Internet-based cognitive behavioral therapy.

ⁱTAU: treatment-as-usual.

^jcCBT: computerized cognitive behavioral therapy.

^kBDI: Beck depression inventory.